= 10/085156

Application or Docket Number

A01201

## PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2001

		Liloui										
CLAIMS AS			(Column 1)		(Column 2)			SMALL ENTITY TYPE		OR	OTHER THAN	
TOTAL CLAIMS			Ц					RATE	FEE		RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	370.00	OR	BASIC FEE	740.00
TOTAL CHARGEABLE CLAIMS			U minus 20=		. 0			X\$.9=		OR	X\$18=	0
INDEPENDENT CLAIMS			minus 3 =		* 0			X42=		OR	X84=	ð
MULTIPLE DEPENDENT CLAIM PI			RESENT					+140=	·		+280=	
* If the difference in column 1 is less than zero, enter "0" in col						olumn 2				OR		2(4 1)
CLAIMS AS AMENDED - PART II								TOTAL		OR	OTHER	740.00 THAN
		(Column 1)	7- 7-			(Column 3)	<u> </u>	SMALL	ENTITY	OR	SMALL	_
AMENDMENTA		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BEA	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	· 4	Minus	** 2	0	= Ø		X\$ 9=		OR	X\$18=	
	Independent	* /	Minus		3	= Ø		X42=		OR	X84=	
	FIRST PRESE	NTATION OF MI	JLTIPLE DE	PENDENT	CLAIM		j	+140=		OR	+280=	
								TOTAL			TOTAL	
(0-1								ADDIT, FEE		OR	addit. Fee	
		(Column 1) CLAIMS		(Colui	mn 2)	(Column 3)	4 .		بمدات بسندام			
AMENDMENT B		REMAINING AFTER AMENDMENT		NUM PREVE	BER	PRESENT EXTRA		PATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		æ		X\$ 9=		OR	X\$18=	
	Independent	+ 	Minus	***	F 64 4424	=	41	X42=		OR	X84=	
	THS! PHESE	NTATION OF MI	JUINTLE DE	PENUEN	CLAIM		J	+140=		OR	+280=	
								TOTAL ADDIT. FEE			TOTAL ADDIT. FEE	
		(Column 1)		(Colu	mn 2)	(Column 3)						
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=	11	X42=		OR	X84=	
L	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						1	1140-			+280=	
* if the entry in column 1 is less than the entry in column 2, write "0" in column 3.								+140= TOTAL		OR	TOTAL	
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."												
		nber Previously Pai						nd in the app	ropriate box	in col	น <b>ก</b> ก 1.	